



APPLICATION INFORMATION

Applicant Name

Applicant Address

Phone No.

Contact Name

Applicant's Interest in Property

☐ Own ☐ Rent

If applicant is not owner, owner's authorization is required to process request. See signature below.

DAY CARE/LOCATION INFORMATION

Location/Street Address

Assessor's Parcel No.

Parcel Size

Redevelopment Area (If applicable)

General Plan Designation

Current Zone Designation

Planned Community (if applicable)

Existing Use of Property

Hours of Day Care Operation

Number of Children under licensee's care

Ages of Children to be care for

A SITE PLAN MUST BE SUBMITTED WITH THIS PERMIT APPLICATION. SITE PLAN MUST SHOW THE LAYOUT OF THE HOUSE, YARD AND DROP-OFF AND PICK-UP AREAS.

Print Applicant Name

Applicant Signature

Date

Print Owner Name

Owner Signature*
(Required if Applicant is not Owner)

Date

(Staff Use Only)

Case No.: _____

Filing Date: _____ By: _____

Assigned Planner: _____

Project Account No.: _____

* Letter of owner consent may be used in lieu of signature.